1321423

FORM D



filing of a federal notice.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
NIFORM LIMITED OFFERING EXEMPTIO

A	302 ×	108	
	OMB A	APPRO	IAVC

OMB Number: 3235-0076 Expires May 31, 2005

SEC USE ONLY

Estimated average burden hours per response:

Prefix

16.00

Serial

04014301	SECTION 4(6), AN UNIFORM LIMITED OFFERI		DATE RECEIVED
Name of Offering (□ check if t	his is an amendment and name has change	d, and indicate change.)	
Mercury Capital Partners	III, L.P. Limited Partnership Interests		sil/ lel
Filing Under (Check box(es) th		5 🗹 Rule 506	Section 4(6) ULOEVED
Type of Filing: New Fili			
	A. BASIC IDENT	IFICATION DATA	Control of the second
1. Enter the information reques			as to 2004 🥒 📎
Name of Issuer (check if t	his is an amendment and name has change	d, and indicate change.)	
Mercury Capital Partners	Ш, L.P.		
Address of Executive Offices 220 Northpointe Parkway	(Number and Street, City, S , Suite D, Amherst, New York 14228	tate Zip Code)	Telephone Number (including Area Code) (716) 639-9300
Address of Principal Business ((if different from Executive		, State and Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business To invest in equity and eq	uity-related securities of issuers primari	ly in the media, commur	nications and entertainment industries.
Type of Business Organization corporation business trust	☑ limited partnership, ☐ limited partnership,		other (please specify): PROCESSED MAR 3 1 2004
Actual or Estimated Date of Inc	Mon corporation or Organization: 0	1th Year 0 4	☐ Actual ☐ Estimated THOMSON FINANCIAL
Jurisdiction of Incorporation or	` `	. Postal Service abbreviat ; FN for other foreign jur	
77d(6). When To File: A notice must be a Exchange Commission (SEC) on the due, on the date it was mailed by U. Where to File: U.S. Securities and Copies Required: Five (5) copies photocopies of the manually signed Information Required: A new filing the information requested in Part (with the SEC. Filing Fee: There is no federal filing State:	filed no later than 15 days after the first sale one earlier of the date it is received by the SEC a inited States registered or certified mail to that a Exchange Commission, 450 Fifth Street, N.W., of this notice must be filed with the SEC, or I copy or bear typed or printed signatures. I copy or bear typed or printed signatures. I can any material changes from the information of fee.	of securities in the offering. at the address given below or address. Washington, D.C. 20549. The of which must be manual endments need only report the on previously supplied in Pa	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. A notice is deemed filed with the U.S. Securities and it freceived at that address after the date on which it is ally signed. Any copies not manually signed must be the name of the issuer and offering, any changes thereto, rts A and B. Part E and the Appendix need not be filed.
that have adopted this form. Issue made. If a state requires the paym	rs relying on ULOE must file a separate notice	with the Securities Admini- the exemption, a fee in the	strator in each state where sales are to be, or have been proper amount shall accompany this form. This notice

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
* Each promoter of the issuer, if the issuer has been organized within the past five years;
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☑ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General Partner and/or Managing Partner
Full Name (Last name first, if individual)
Mercury Capital III G.P., LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
220 Northpointe Parkway, Suite D, Amherst, New York 14228
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director* General and/or * Manager of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual)
Mercury Capital III Management, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
220 Northpointe Parkway, Suite D, Amherst, New York 14228
Check Box(es) that Apply:
Full Name (Last name first, if individual)
Banta, Charles W.
Business or Residence Address (Number and Street, City, State, Zip Code)
220 Northpointe Parkway, Suite D, Amherst, New York 14228
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer* Director+ General and/or *of the Issuer's General Partner & General Partner's Manager +of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual)
Balbach, C. Teo
Business or Residence Address (Number and Street, City, State, Zip Code)
220 Northpointe Parkway, Suite D, Amherst, New York 14228
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director+ General and/or + of the Issuer's General Partner Managing Partner
Full Name (Last name first, if individual) Handy, Peter
Business or Residence Address (Number and Street, City, State, Zip Code)
220 Northpointe Parkway, Suite D, Amherst, New York 14228
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Officer General Partner General Partner Managing Partner Managing Partner
Full Name (Last name first, if individual)
Miller, Sandra A.
Business or Residence Address (Number and Street, City, State, Zip Code)
220 Northpointe Parkway, Suite D, Amherst, New York 14228
Check Box(es) that Apply:
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. INF	ORMA	TION AB	OUT OFFE	RING				
1 Marsh	م نموریم معالم	المحمام معاد	a iagnas isa	omd to soll to			anta na imatita a	ac			Yes	No
1. mas un	e-issuer sold	, or does u						•	 E.	••••••		Ø
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?								5	S 1.	*000,000		
*The Gen	eral Partne	r reserves:	the right to	o accept subs	cription	s for lesser	amounts.				Yes	No
		•	-	_							Ø	
commi If a pe or state	ission or sin rson to be li es, list the n	nilar remuno sted is an a ame of the	eration for ssociated p broker or d	solicitation of erson or agen	f purchast of a bro t of a bro e than fi	sers in conn oker or deals ve (5) perso	ection with sale or registered w ns to be listed	les of sec rith the S	etly or indirect urities in the of EC and/or with ciated persons	ffering. a state		
Full Name	(Last name	first, if ind	ividual)									
	mer, Marti											
Business o	or Residence	Address (1	Number and	Street, City,	State, Z	ip Code)						
Rock Spri	ing Plaza, 6	550 Rock S	Spring Dri	ve, 6th Floor,	Betheso	la <u>, M</u> arylan	d 20817					_
Name of A	Associated B	roker or De	aler									
Koonce S	ecurities, In	e.		_								
				or Intends to	Solicit I	urchasers						A.)) C.
(Check ".	All States" o	AZ]	(AR]	(CA)	[CO]		ale (DE)			(GAIL	U [HI]	All States [ID]
	[אנו]	(IA]	[KS]	IKYI.	[LA]	Market Street	## CPE John S MATEMIDITAL	20 PM	The state of the s	MNL	[MS]	[MO]
[MT]	(NE)	[NV]	[NH]	E NAME	[NM]	P. LATER ST.	NC)	[ND]	i (on)	[OK]	[OR]	PALE
[RI]	a [se]	[SD]	[TN]	ixi i	THE RESERVE THE PARTY AND	TACK BUREAU TO SECURE A SECURE	I (VA)	[WA]	e iwyj s	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
												
Business o	or Kesidence	Address (r	vumber and	d Street, City,	State, Z	ip Code)						
Name of A	Associated B	roker or De	aler						· · · · · · · · · · · · · · · · · · ·			
				or Intends to		urchasers					0 /	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividuai)									
Business of	or Residence	Address (1	Number and	1 Street, City,	State, Z	ip Code)						
		·		, ,		•						
Name of A	Associated B	roker or De	aler									
				or Intends to								J All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN] ,	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[[[]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$_	0	_	s _	00
	Equity	\$	0			0
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	s _	0	_	\$ _	0
	Partnership Interests	\$	120,000,000			35,150,000
	Other (Specify)	s _	0	_		0
	Total					35,150,000
	Answer also in Appendix, Column 3, if filing under ULOE.	_		-		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors			Aggregate Dollar Amount of Purchases
	Accredited Investors	_	33	_	\$_	35,150,000
	Non-accredited Investors	_	0	_	s _	0
	Total (for filings under Rule 504 only)	_	N/A		\$_	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		•			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.					5
	Type of offering		Type of Security			Dollar Amount Sold
	Rule 505	_	N/A		\$_	N/A
	Regulation A	_	N/A		_	N/A
	Rule 504		N/A		\$	N/A
	Total	_	N/A			N/A
ť	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			1	\$_	0
	Printing and Engraving Costs		Ε)	\$_	0
	Legal Fees			İ	\$_	115,000
	Accounting Fees			ļ	\$_	00
	Engineering Fees			1	s _	0
	Sales Commissions (specify finders' fees separately)				s _	13,500
	Other Expenses (identify) (organization of the partnership)				s _	57,564
	Total				s _	186,064

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."							\$119,813,936			
to be used for each of the purposes sh furnish an estimate and check the b	usted gross proceeds to the issuer used or nown. If the amount for any purpose is no pox to the left of the estimate. The to ed gross proceeds to the issuer set forth in	ot know al of th	n, ne							
				Payments to Officers, Directors, & Affiliates			Payments To Others			
Salaries and Fees		🗆	\$_	0	_ 🗆	\$_	0			
Purchase of real estate				0	_ 🗆	\$_	0			
Purchase, rental or leasing and install	ation of machinery and equipment	🗆	s _	0		\$ _	0			
Construction or leasing of plant buildings and facilities			s _	0		s _	0			
this offering that may be used in e	uding the value of securities involved in exchange for the assets or securities of	🗖	\$	0		ę				
Repayment of indebtedness			\$	0		*_ «	0			
						* -				
Working capital Other (specify): Investment Capital			3	0	- 2	J _	119,813,936			
			_	<u> </u>		_				
Column Totals		🗖	\$	0	_ Ø	s _	119,813,936			
Total Payments Listed (column totals	added)			Ø \$	119,8	13,93	6			
	D. FEDERAL SIGNAT	URE								
llowing signature constitutes an under	to be signed by the undersigned duly autaking by the issuer to furnish to the U.S. the issuer to any non-accredited investor p	Securit	ies and	Exchange Com	mission,	, upon				
er (Print or Type)	Signature			Date						
cury Capital Partners III, L.P.	2 Dandural Mi	110	.	March 16, 2	004					
ne of Signer (Print or Type)	Title of Signer (Print or Type)									
dra A. Miller	Secretary and Treasurer of the Issuer's General Partner									

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).